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Attorneys at Law
919 N. Market Street, Suite 1800
P.O. Box 111
Wilmington, DE 19801-3023
Phone 302.984.6300
Fax 302.984.6399
www.mccarter.com

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TO: USPTO	FAX NO: 571-273-8300
FROM: Basil S. Krikelis	REGISTRATION NO.: 41,129
TELEPHONE NO.: (302) 984-6393	FAX NO.: (302) 984-6399
FIRST INVENTOR: Orn Adalsteinsson	EXAMINER: Chen, Stacy Brown
TITLE OF APPL: GLUCOSAMINE AND EGG FOR REDUCING INFLAMMATION	
SERIAL NO: 10/774,021	FILING DATE: February 6, 2004
ART UNIT: 1648	CONFIRMATION NO. 7718
LIST OF ATTACHMENTS: RCE Transmittal – 1 Page; Fee Transmittal – 1 Page; Preliminary Amendment – 12 Pages	
Comments:	
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PTO/SB/17 (01-06)

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2006** Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

905.00

Complete If Known

Application Number	10/774,021
Filing Date	February 6, 2004
First Named Inventor	Orn Adalsteinsson
Examiner Name	Chen, Stacy Brown
Art Unit	1648
Attorney Docket No.	99726-00127

METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): _____ Deposit Account Deposit Account Number: 50-0929 Deposit Account Name: Arkion Life Sciences, LLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

 Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues) 50 25

Each independent claim over 3 (including Reissues) 200 100

Multiple dependent claims 360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Small Entity Fee (\$)
- 20 or HP =	x	=		Fee (\$)	Fee (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): RCE Fee and 3 Mo. Extension of Time

Fee Paid (\$)

905.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 41,129	Telephone 302-984-6393
Name (Print/Type)	Basil S. Krikels		Date October 17, 2006

This collection of information is required by 37 CFR 1.130. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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